## 12030744691

FEC FORM 1

## STATEMENT OF ORGANIZATION

RECEIVED
2012 FEB 23 AM 8: 51
FEC MAIL CENTER.

Ì.

				THUTTAIL	Office Use Only
NAME OF COMMITTEE (in full)	1 2	(Check if name s changed)	Example:If typing, type over the lines.	12FE4M5	8). V
TM4UPAC	<u></u>	<u> </u>			
ADDRESS (number and street)	621	3 CHA	RILIOITITE AUE	<del> </del>	
(Check if address	15 U i	TE III	2		
(Check if address is changed)	NAS	HVILL	<u> </u>	TW	37209-
			CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRES	SS (Please	provide only one	e-mail address)		
(Check if address	1160	reniere	Tis discrowipi on	nat	
is changed)		<u> </u>	•	1 1 1 1 1	
COMMITTEE'S WEB PAGE ADD	DRESS (U	RL)			
		<u> </u>			
(Check if address is changed)	<u> </u>	<u> </u>		<u> </u>	
2. DATE 0.2 1.	ŝ / 2	012.			
3. FEC IDENTIFICATION NU	JMBER	C	engemengamen agamen separamagnaren, erri osarra amag kantariak di seriak disentariak sebir mendilari eta di seriak andinariak di seriak disentariak sebir mendilari eta di seriak sebirak sebirak sebirak sebirak sebirak sebirak		
4. IS THIS STATEMENT	C NEW	(N) OR	AMENDED (A)		
I certify that I have examined th	is Statem	ent and to the be	st of my knowledge and belie	of it is true, correct	and complete.
Type or Print Name of Treasure		Troy	Brewer		
Signature of Treasurer	Try	Frun		Date 0.	2 15 2012
NOTE: Submission of false, errone			n may subject the person signir		
Office Use			For further information Federal Election Communication Tall From 200 424 0530	nission	FEC FORM 1

	TYPE OF COMMITTEE  Candidate Committae:							
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)						
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
	ne of didate							
	didete y Affiliati	Office State Senate President District						
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.						
Nam Can	e of didate							
Par	ty Con	nmittee:						
(d)		This committee is a (National, State or subordinate) committee of the Republican, etc.) Party						
Poli	itical A	Action Committee (PAC):						
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is						
		Corporation Wo Capital Stock Labor Organization						
		Membership Organization Trade Association Cooperative						
		In addition, this committee is a Lobbyist/Registrant PAC.						
(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)						
		In addition, this committee is a Lobbyist/Registrant PAC.						
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
Join	nt Fund	draising Representative:						
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.						
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.						
	Com	Committees Participating in Joint Fundraiser						
	1.							
	2.							
	3.							
	4.							

CPA

I	FEC Form 1 (Re	rised 02/2009)		Page <b>3</b>
w	rite or Type Committee	Name		
	TNYUPAC			
6.	Name of Any Conne	ted Organization, Affiliated Committee, Joint Fundraising F	Representative,	or Leadership PAC Sponsor
F	RITEWOS 6	F SCOTT DESTARLAIS		
6	213 CHA	LOTTE AVE		
	Mailing Address	SUITE 1112		
		NASHVILLE	TN	37.20.9-
		CITY	STATE	ZIP CODE
	Relationship: Cor	nected Organization Affiliated Committee Joint Fundral	sing Representa	tive Leadership PAC Sponsor
7.	Custodian of Record books and records.	e: Identify by name, address (phone number optional) and p	osition of the pe	erson in possession of committee
	Full Name	MES TROY BREWER	! <b>! ! ! !</b>	
	Mailing Address	6213 CHARLOTTE AVE	<u> </u>	
		SUITE 11/2		
		MASHVILLE	TN	37209-
	Title or Position	CITY	STATE	ZIP CODE
	TREA SUR	E, R Telephone	number 6	1:51-1668-15659
8.		ne and address (phone number optional) of the treasurer of e.g., assistant treasurer).	the committee;	and the name and address of
	Full Name of Treasurer	MRS TROY BREWER		
	Mailing Address	6213 CHARLOTTE AVE		
		SUITE IIIA		
		MASHVILLE	TN	37209-
	Title or Position	CITY	STATE	ZIP CODE

615-668-5659

Telephone number

EC Form	1 (	(Revised	02/2009	١
---------	-----	----------	---------	---

FEC Form 1 (Revi	ised 02/2009)		Page 4
Full Name of			
Designated			
Agent LIL			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position			
		Telephone number	.  -   -
		releptione flutibet	<u></u>
	ories: List all banks or other depositories in w	which the committee deposits t	unds, holds accounts, rents
safety deposit boxes or m			
Name of Bank, Depositor	ry, etc.		
REC	GIONS BANK	<u> </u>	
Mailing Address	181 BEGLE FOR	2 E S T C 1 R C L	E
			1 1 1 1 1 1 1 1
	NASHUILLE	TN	37.221-
	A Secure to the Grand and the secure of the		
	CITY	STATE	ZIP CODE
Name of Bank, Depositor	v. etc.		
	,, · · · ·		
Mailing Address			
	CITY	STATE	ZIP CODE

9.

## **Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail Delivery Confirmation™ or Signature Confirmation™ Label Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): 2/23/12

DATE PREPARED

(3/2005)